

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10 593,254

FILING DATE

09-18-06

APPLICANT(S)

CLAIMS

	after Article 34		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3						
4						
5						
6						
7						
8	Canceled					
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16	Canceled					
17	Canceled					
18	Canceled					
19		1				
20		1				
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49						
50						
TOTAL IND.	3					
TOTAL DEP.	13					
TOTAL CLAIMS	16					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						